Notification (' Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

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This initial notification information is required by Section, 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must which applies. **\$106.08** be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item

	,					/	3, 1	ILS.	-000-	COI-	- <i>GI</i>
Ā	Person Required to Notify:		Name	Amoc	o Oil Comp	any					
	Enter the name and address of the or organization required to notify.		Street		East Rando						
		City	Chic			State	IL	Zip Code	6060	1	
В	Site Location:			Amog	o Oil Comp	any River	front	Prop	erty		
	Enter the common name (if known) and actual location of the site.			TENCE	GATE :	The second	Ro	WE.	3		
12	1980503221	•	City	Wood Ri	ver County	Madison	State	IL	Zip Code	62095	
0	Person to Contact:										
	Finter the name, title (if applicable business telephone number of the to contact regarding information submitted on this form.		Name (Las	st, First and Title		, Charles	A.,		visor, S Control		
D	Dates of Waste Handling:					··		 -			
	Enter the years that you estimate treatment, storage, or disposal be ended at the site.	waste egan and	From (Yea	r) 1973	To (Year)	1978	·				 -
E	Waste Type: Choose the option	on you pr	efer to c	omplete	<u>.</u> .						<u>_</u>
	Option I: Select general waste ty you do not know the general was encouraged to describe the site in	r sources,	you are	Resource	This option i Conservation is (40 CFR Pa	and R	ecovery				
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	of Waste: X in the	appropriate	EPA has a listed in the appropriat the list of contacting	Type of Wast assigned a for ne regulation te four-digit r hazardous w the EPA Reg	ur-digit s unde umber astes a	r Section in the land code	n 3001 of F boxes provides can be of	RCRA. Ent ded. A co btained b	ter the py of v	
	1. ☐ Organics	1. 🗆 Mi	ining		located.	•					
	z. 臼 inorganics		ກາຣແ ພວແ່ນເ	11	ļ <u>-</u>	1 1			7 /		7
	3 □ Solvents	3. □ Te	xtiles						 		
	 ☐ Posticides 	4. □ Fe	rtilizer			i			1		7
	5. ☐ Heavy metals		per/Print	-					1		7
	6. 凶 Acids		ather Tan	-							
	7. 🗆 Bases		n/Steel F	•							
	8. PCRs		nemical, G								
	9. Mixed Municipal Waste		ating/Poli								
	10. Unknown		•	nmunition onductors							_
	11. [] Other (Specify)		ansforme			[] [
			ility Comp	_	}	000.					
			inity Comp initary/Re		1	ון טטט) I	film _	۵.		
		14. ☐ Sa 15. ☐ Ph	-	ause		0001	,	1014 -8	81		
			b/Hospita	al	-				•		
		10. 🗆 La		u:		>	9103	.)			
			her (Spec	:ifv)		EPA	Region	5 Records	s Ctr.		
		Buter	ne Poly	merization	}	A seem					
					1				H .		

Form Approved OMB No. 2000-0138 EPA Form 8900-1

	Notification of Hazardous Waste Site	Side Two	ا من من من الله الله الله الله الله الله الله الل				
F	Waste Quantity:	Facility Type	Total Facility Waste Amount cubic feet gallons Unknown Total Facility Area square feet acres 3-4				
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. 🗆 Piles					
	In the "total facility waste amount" space	 □ Land Treatment XX Landfill 					
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. 🗆 Tanks					
	using cubic feet or gallons.	5. D Impoundment 6. D Underground Injection					
	In the "total facility area" space, give the estimated area size which the facilities	7. Drums, Above Ground					
	occupy using square feet or acres.	8. Drums, Below Ground					
		9. Other (Specify)					
G	Known, Suspected or Likely Releases Place an X in the appropriate boxes to indica		57 Known C Suspected C Likely C None				
	or likely releases of wastes to the environme		⊠ Known □ Suspected □ Likely □ None				
	Note: Items Hand I are optional. Completin hazardous waste sites. Although completing		and local governments in locating and assessing ouraged to do so.				
Н	Sketch Map of Site Location: (Option	al)	=== 10				
	Sketch a map showing streets, highways, routes or other prominent landmarks near	see De	uplicate ATTACHE				
	the site location. Draw an arrow showing	£ .	uplicate ATTACKED MAP SKETCK				
	the direction north. You may substitute a publishing neap showing the site location.	702	many skerac				
			•				
	•						
i	Description of Site: (Optional)						
	Describe the history and present conditions of the site. Give directions to						
	the site and describe any nearby wells, springs, lakes, or housing. Include such						
	information as how waste was disposed and where the waste came from. Provide						
	any other information or comments which may neip describe the site conditions.		•				
	may help describe the site conditions.						
J	Signature and Title:						
	The person or authorized representative (such as plant managers, superintendents,	Name R. J. Baechle	& Owner, Present				
	trustees or attorneys) of persons required to notify must sign the form and provide a	Street 400 South Main Stre					
	mailing address (if different than address		☐ Transporter IL 7 62095 🛣 Operator, Present				
	ir item A). For other persons providing notification, the signature is optional.	City Wood River State	Zip Code				
	Check the boxes which best describe the relationship to the site of the person	1/ 0 (1) 1000 1	☐ Other				
	required to notify. If you are not required to notify check "Other".	Signature VI. Y. VO acci-	L Date 3-13-81				

Madeson Co. - S.F.

SEP: Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20450

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This initial notification information is
required by Section 103(c) of the Compre-
hensive i nvironmental Response, Compen
sation, and Liability Act of 1980 and must
be mailed by June 9, 1981,

Form Approved OMB No. 2000-0138

EPA Form 8900-1

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

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	be mailed by June 9, 1981.		willen app	s. 8	10608	P/ N/C	D 145-00	00-001-04
Ā	Person Required to Notify:					,		
	Enter the name and address of the	e person	Name	Amoco C	il Company			
	or organization required to notify.		Street	200 Eas	t Randolph Dr	ive		
		City	Chicago		State IL	Zip Code	60601	
В	Site Location:	-1	Name of Site	CEE JA	Landfill			
	Enter the common name (if knowl actual location of the site.	Street St	W Quarte	r Section 28,	Township 6N,	Range 9W		
_	TLD98060718	City		County Mad	ison _{State} IL	Zip Code	99999	
С	Person to Contact:		No // ene /	First and Title)	Bartels Ch	arles A., Supe	rvisor. S	olid
	Enter the name, title (if applicable business telephone number of the		Name (Last, I				Control	
	to contact regarding information submitted on this form.	e person	Phone	61	8/251-2403			
	Dates of Waste Handling:							- <u></u>
	Enter the years that you estimate treatment, storage, or disposal begended at the site.		From (Year)	1974	To (Year)	1974		
	boxes. The categories listed overlap. Check each applicable category. 1. \(\) Organics 1. \(\) Mir \(2. \) Cor \(3. \) Solvents 3. \(\) Tex \(4. \) Pesticides 4. \(\) Fer \(5. \) Heavy metals 6. \(\) Acids 6. \(\) Lea \(7. \) Bases 7. \(\) Bases 7. \(\) Bross 8. \(\) PCBs 9. \(\) Mirot Note (Specify) 11. \(\) Ele \(12. \) Tra \(13. \) Util		ning nstruction xtiles rtilizer per/Printing ather Tannin n/Steel Fou temical, Gen ating/Polish ditary/Amm actrical Conc ansformers ility Compan	g ng indry neral ing unition ductors	listed in the reg appropriate fou the list of hazar contacting the l located.	of Waste: ed a four-digit numb purations under Secti r-digit number in the dous wastes and coe EPA Region serving to	on 3001 of f boxes provides can be of	RCRA, Enter the ded. A copy of obtained by
		15. □ Ph 16. □ Lai 17. □ Un	b/Hospital		5 0 0			

ZUN i o TSa:

	Notification of Hazardous Waste Site	Side Two	4						
F	Waste Quantity:	Facility Type	Total Facility Waste Amount						
٢	Place an X in the appropriate boxes to	1. Piles	cubic feet Unknown						
	indicate the facility types found at the site.	2. Land Treatment	CODE 1481						
	In the "total facility waste amount" space give the estimated combined quantity	3. Ø Landfill	gallons						
	(volume) of hazardous wastes at the site	4. Tanks	Total Facility Area						
	using cubic feet or gallons.	 Impoundment Underground Injection 	square feet						
	In the "total facility area" space, give the estimated area size which the facilities	7. Drums, Above Ground	acres Unknown						
	occupy using square feet or acres.	8. Drums, Below Ground							
		9. Other (Specify)							
Ğ	Known, Suspected or Likely Releases	to the Environment:							
		Place an X in the appropriate boxes to indicate any known, suspected, Suspected Likely None or likely releases of wastes to the environment.							
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing		and local governments in locating and assessing ouraged to do so.						
Н	Sketch Map of Site Location: (Options	al) .							
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.								
			•						
		•							
			·						
		•	•						
		_							
	•	-							
-	Description of Site: (Optional)								
•	Describe the history and present	•							
	conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which								
	may help describe the site conditions.								
•									
J	Signature and Title:	D T Dea-ble							
	The person or authorized representative (such as plant managers, superintendents,	Name R. J. Baechle	Owner, Present						
	trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address	Street 400 South Main Stree	Transporter						
	in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the	City Wood River State I	- U Operator, rast						
	relationship to the site of the person required to notify. If you are not required to notify check "Other".	Signature M. J. Wall	Date 5-15-81						



Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must which applies.

Please type or print in ink. If you need additional space, use separate sheets of

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	be mailed by June 9, 1981.	ind music	тиноп срри	810	601				t) 115	-000	0-001-0
Ā	Person Required to Notify:					_					
	Enter the name and address of the	e person	Name	Amoco	OTT	Company					
	or organization required to notify.		Street	200 Ea	st F	Randolph	Drive				
			City	Chicag	10			State	IL	Zip Code	60601
В	Site Location:		Name of Site	Amoco	Oil	Company	Riverf	ront	Proper	ty	
	Enter the common name (if known actual location of the site.	n) and	Maine of Site								
	acted tocation of the ofte.		Street	Highwa	7 3	Levee	. GAte	<u>, </u>	173		
I	LJ 980303221	/	City Wood	l River		County Mac	lison	State	IL	Zip Code	62095
C	Person to Contact:										
	Enter the name, title (if applicable)		Name (Last, Fi	rst and Title)		Bartels,	Charl	es A.	, Supe	rvisor,	Solid
	business telephone number of the to contact regarding information	person	Phone 6	18/251-	2403	}			Waste	e Contro	1
	submitted on this form.										
D	Dates of Waste Handling:						- 				
_	Enter the years that you estimate	waste		(1)			1980				
	treatment, storage, or disposal beg ended at the site.		From (Year)		1	To (Year)					
	(1	l) Unkn	own; coul	d be si	nce	refinery	began	oper	ations	s in 190	8.
Ε	Waste Type: Choose the option	n you pro	efer to com	plete				-			
E	Option I: Select general waste typ you do not know the general waste encouraged to describe the site in	e types or	sources, you	ı are	Re		servation	and Re	covery		niliar with the Section 3001
	Place an X in the appropriate	Source of Place an boxes.	of Waste: X in the app	ropriate	EP lis: ap the cor	ted in the re propriate fo e list of haz ntacting the	ned a fou egulations ur-digit n ardous wa	ir-digit s under umber astes ai	Section in the bond and code:	3001 of R oxes provices can be ob	izardous waste CRA. Enter the led. A copy of otained by which the site is
	1. 凶 Organics	1. 🗆 Mi	ning		loc	cated.					
	2. 🛛 Inorganics	2. 🗆 Co	nstruction	İ	[7 [
	3. 🛭 Solvents	3. 🗆 Tex			-		7			}	
	4. Pesticides	4. ☐ Fe					7				
	5. 🖾 Heavy metals		per/Printing								
	6. ② Acids		ather Tannin	-			7 [
	7. 反 Bases		n/Steel Four	' [
	8. PCBs		emical, Gene								
	9. Mixed Municipal Waste		iting/Polishii								
			litary/Ammu								
			ectrical Cond	uctors							
			ansformers				_				
			lity Compani								
			nitary/Refus	e		0	Onno	ο.	ti na		
		15. □ Ph		j		·	0 0 0 9	O J	11-8	81	
			b/Hospital								
		17. □ Un		ļ							
		ıö. LXIOt	her (Specify)	i							

Form Approved OMB No. 2000-0138 EPA Form 8900-1

Petroleum Refining

	Notification of Hazardous Wast ⁻ Site	Side Two								
F	Waste Quantity:	Facility Type	Total Facility Waste Arguery							
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. K. Piles	cubic feet 10-15 Million							
	In the "total facility waste amount" space	 2. □ Land Treatment 3. □ Landfill 	gallons							
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. □ Tanks	Total Facility Area							
	using cubic feet or gallons.	5. 图 Impoundment 6. 回 Underground Injection	square feet							
	In the "total facility area" space, give the estimated area size which the facilities	7. ☐ Drums, Above Ground	acres About 26							
	occupy using square feet or acres.	8. Drums, Below Ground 9. Dother (Specify)								
G	Known, Suspected or Likely Releases to the Environment:									
ŭ	Place an X in the appropriate boxes to indicate any known, suspected, ☐ Suspected ☐ Likely ☐ None									
	or likely releases of wastes to the environment. Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing									
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing	g these items will assist EPA and State ig the items is not required, you are en	e and local governments in locating and assessing couraged to do so.							
Н	Sketch Map of Site Location: (Options	al)								
	Sketch a map showing streets, highways, routes or other prominent landmarks near									
	the site. Place an X on the map to indicate the site location. Draw an arrow showing									
	the direction north. You may substitute a publishing map showing the site location.									
	publishing map showing the site location.									
	•									
\overline{I}	Description of Site: (Optional)									
	Describe the history and present		g closed. Site is underlain							
	conditions of the site. Give directions to the site and describe any nearby wells.	with highly impermed being constructed as	able clay. Slurry wall is round site, keyed into under-							
	springs, lakes, or housing. Include such information as how waste was disposed	lying clay. Clay c	ap will be applied and graded							
	and where the waste came from. Provide any other information or comments which	for proper drainage	•							
	may help describe the site conditions.									
J	Signature and Title:									
	The person or authorized representative (such as plant managers, superintendents,	Name R. J. Baechle	🖔 Owner, Present							
	trustees or attorneys) of persons required	Street 400 South Main St	reet							
	to notify must sign the form and provide a mailing address (if different than address is its its at A). For other persons providing	Wood Pivor	☐ Transporter IL 3 62095 ※☐ Operator, Present							
	In item A). For other persons providing notification, the signature is optional.	City Wood River State	Zip Code							
	Check the boxes which best describe the relationship to the site of the person	K // Hace A	☐ Other							
	required to notify. If you are not required to notify check "Other".	Signature / / / COURCE	Date 5-15-81							

Madison Co. - S.F.

RIVERFRONT FIVE IL-0407-09

Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response. Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

EPA Form 8900-1

Please type or print in ink. If you need

							X	* \	ILS	-000	0-001-0
Ā	Person Required to Notify:					0:1 0					
	Enter the name and address of the or organization required to notify.		Name			Oil Company					
	or or garnession requires to mem,		Street		200 Ea	st Randolph	Drive				
			City		Chicag	10		State	IL	Zip Code	60601
В	Site Location:			4.0	Amoco	Cil Company	River	ront F	roper	tv	
	Enter the common name (if know actual location of the site.	n) and		of Site		_ _					
	 .		Street	<u> </u>	Highwa	iy 3					
7	LS 98050322		City	Wood	River	County Ma	dison	State	IL	Zip Code	62095
C	Person to Contact:					D-144-1-	~ ~ ~ · ·		C		Calid
	Enter the name, title (if applicable, business telephone number of th				st and Title)		, char.	les A.,		rvisor,	
	to contact regarding information submitted on this form.	- p 0.00.	Phone	6.	18/251-	2403			Masce	CONCIO	
	submitted on this form.										
\overline{D}	Dates of Waste Handling:										
	Enter the years that you estimate	waste	<u>.</u> .		(1)		1980				
	treatment, storage, or disposal be ended at the site.	egan and	From (Year)		To (Year)					
		(1) linkn	own:	could	d be si	nce refiner	v begar	opera	tions	in 190	8.
_											
Ε	Waste Type: Choose the option	on you pr	efer to	o comp	olete			_			
	Option I: Select general waste types and so you do not know the general waste types or encouraged to describe the site in Item I—D		sourc	es, you	are		nservation	and Rec			iliar with the Section 3001
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	Type of Waste: X in the appropriate ne categories listed Check each applicable Source o Place an boxes.			opriate	listed in the appropriate f the list of ha contacting th	igned a fo regulation our-digit i zardous w	ur-digit n is under : number in /astes an	Section n the bo d codes	3001 of R exes provid can be of	ezardous waste ICRA Enter the Ided. A copy of Stained by Which the site is
	1. KI Organics	1. 🗆 Mi	ning			located.					
	2. 2 Inorganics	2. 🗆 Co	_	tion			_ [
	3. 🛭 Solvents	3. 🗆 Te:	xtiles							-	
	4. Pesticides	~ 4. □ Fe	rtilizer				⊣				
	5. D Heavy metals	5. 🗆 Pa		•			7				
	6. Acids	6. 🗆 Le		_							
	7. 🖸 Bases	7. 🗆 Iro			- 1						
	8. D PCBs	8. 🗵 Ch									
	9. Mixed Municipal Waste 10. Unknown	9. 🗆 Pla	-		- 1		\Box				
	11. 🖾 Other (Specify)	10. 🗆 Mi 11. 🗆 Ele			1		_			<u> </u>	
	Asbestos	12. 🖸 Tra			Stors					<u> </u>	
	Fly Ash	13. 🗆 Ut			es						
		14. □ Sa					0 0 0 0	_			
		15. 🗆 Ph			-	(0000	98 r	// -O	n ,	
		16. 🖸 La						· 0 5	B	91	
		17. 🗆 Ur		•							
		18. Ø Ot	her (S		ining						
	Form Approved OMB No. 2000-0138										

	Notification of Hazardous Waste Site	Side Two					
F	Waste Quantity:	Facility Type	Total Facility Waste Amount				
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. K. Piles	cubic feet 10-15 Million				
	In the "total facility waste amount" space	2. Land Treatment 3. Landfill	gallons				
	give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.	4. ☐ Tanks 5. ፟ Impoundment	Total Facility Area				
	In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.	6. ☐ Underground Injection 7. ☐ Drums, Above Ground	acres About 26 A				
		8. Drums, Below Ground 9. Other (Specify)					
G	Known, Suspected or Likely Releases to	the Environment:					
	Place an X in the appropriate boxes to indicat or likely releases of wastes to the environment		☑ Known ☐ Suspected ☐ Likely ☐ Non				
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing		and local governments in locating and assessir couraged to do so.				
H	Sketch Map of Site Location: (Optional	1)					
n	Sketch a map showing streets, highways,						
	routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.						
	routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a						

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify If you are not required to notify check "Other".

Name	R. J. Baechle	🕷 Owner, Present				
Street	400 South Main Street	Owner, Past Transporter				
City	Wood River State IL Zip Code 62095	XD Operator, Present				
Signaturi	R. Macche Dote 5-15-81	☐ Other				

	Notification of Hazardous Waste Site	Side Two						
F	Waste Quantity:	Facility Type	Total Facility Waste Amount					
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. ☐ Piles	cubic feet Unknown					
	In the "total facility waste amount" space	2. Land Treatment Landfull	gallons Total Facility Area					
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. Tanks						
	using cubic feet or gallons.	5. Impoundment	square feet					
	In the "total facility area" space, give the estimated area size which the facilities	6. ☐ Underground Injection 7. ☐ Drums, Above Ground	acres Unknown					
	occupy using square feet or acres.	8. Drums, Below Ground						
		9. Dother (Specify)						
G	Known, Suspected or Likely Releases t	to the Environment:						
	Place an X in the appropriate boxes to indica or likely releases of wastes to the environme		☐ Known 🖏 Suspected 🗆 Likely 🗀 None					
	Note: Items Hand I are optional. Completing hazardous waste sites Although completing		e and local governments in locating and assessin accuraged to do so.					
Н	Sketch Map of Site Location: (Optional	ai)	•					
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing trie site location.		, -					
	publishing map showing the site location.		·					
		•						
			_					
			_					
	Description of Site: (Optional)							
•	Describe the history and present		e e e					
	conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.							
J	Signature and Title:	R. J. Baechle						
	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a	Name R. J. Batchie Street 400 South Main Street						
	to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is occord.		L Zip Code 62095 Constant Present					
	notification, the signature is optional.	City WOOD RIVET Stat	Zip Code 02093					

EPA Form 8900-1

Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section. 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must Please type or print in ink. If you need additional space, use separate sheets paper. Indicate the letter of the item which applies.

Please type or print in ink. If you need additional space, use separate sheets of

	be mailed by June 9, 1981.			,,,	•	y	ily 1	ILS-	-006-	001-01
Ā	Person Required to Notify: Enter the name and address of t	he person	Name	Атосо	Oil Comp	any				
	or organization required to notify		Street	200 E	ast Rando	lph Driv	re			
			City	Chica	go		State	IL	Zip Code	60601
В	Site Location:			Amocc	Oil Comp	any Rive	erfron	t Prop	ertv	
	Enter the common name (if know actual location of the site.	wn) and	Name of Si	LIVEE	West of R	LLINON	S RO	UTE_	3	
17	1980503221	٠	City	Wood Riv	er County	Madiso	n State	IL	Zip Code	62095
C	Person to Contrate									
	Finter the name, title (if applicable outsiness telephone number of the to contact regarding information submitted on this form.	ne person	Name (Last	t. First and Title) 618/251-	Bartels 2403	, Charle	es A.,		Control	
D	Dates of Waste Handling:									
•	Enter the years that you estimate treatment, storage, or disposal beended at the site.		From (Year)	1973	To (Year)	1978	3		·	
_	Waste Type: Choose the opti	00 4011 00	efer to co	molete				. ——		
E	Option I: Select general waste tyou do not know the general was encouraged to describe the site if General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	sources, escription of Waste:	you are	Resource (regulation: Specific T EPA has a listed in the appropriate the list of	Conservations (40 CFR In 1995) The symmetry of Wassigned a file regulation of the four-digit hazardous	on and Reart 261 ste: four-digit ons under number wastes a	t number r Section r in the b	r to each h n 3001 of f loxes provi	niliar with the) Section 3001 azardous waste BCRA. Enter the ded. A copy of btained by which the site is	
	1. D Organics	1. 🗆 Mi	ning]	located.					
	2. 🗓 inorganics		กรถ นิติถึงก	, į	[1			(
	3. ☐ Solvents	3. 🗆 Te							!	
	4. 🗆 Pesticides	4. □ Fe		1						
	5. Heavy metals		per/Printil ather Tanr	- 1						
	6. Ø Acids 7. □ Bases		ather tahr in/Steel Fo	•	<u> </u>				l	
	8. D PCRs		emical. Ge						{	
	9. Mixed Municipal Waste		sting/Polis	1	ļ		-			
	10. ☐ Unknown		litary/Am	- 1	 		}		┤ ├─	
	11. ☐ Other (Specify)	11. 🖸 Ele	ectrical Co	nductors						
			lity Compa	·		nnn.	٥.			
			nitary/Ref	. 1		0001	UI.	JUN -0	21	
		15. 🗆 Ph		1					01	
		16. 🗆 La	b/Hospital	1						
		17. 🖸 Ur	iknown	į						
		18. El Ot Buter	her (Speci le Polym	ify) merization						
	Form Approved OMB No. 2000-0138									

•				•
		Notification of Hazardous Waste Site	Side Two	
	F	Waste Quantity:	Facility Type	Total Facility Waste Amount
		Place an X in the appropriate boxes to indicate the facility types found at the site. In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.	1. Piles 2. Land Treatment 3. Landfill 4. Tanks 5. Impoundment 6. Underground Injection 7. Drums, Above Ground 8. Drums, Below Ground 9. Other (Specify)	cubic feet
				gallons Unknown
				Total Facility Area
				square feet
•				ecres 3-4 A
	G	Known, Suspected or Likely Releases to		
		Place an X in the appropriate boxes to indicate or likely releases of wastes to the environment	e any known, suspected,	Known □ Suspected □ Likely □ Non
		Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessin hazardous waste sites. Although completing the items is not required, you are encouraged to do so.		
	Ħ	Sketch Map of Site Location: (Optional Sketch a map showing streets, highways,		1111 15 160
		routes or other prominent landmarks near the site. Piese an X on the map to molecule	38E D	uplicate Allice
		the site location. Draw an arrow showing the direction north. You may substitute a publishing niap showing the site location.	FOR	uplicate ATTACLED
			·	
		•		
	ī	Description of Site: (Optional)		
		Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such		
		information as how waste was disposed and where the waste came from. Provide any other information or comments which may neip describe the site conditions.		
•		·		
		Cinnatura d Title		
	J	Signature and Title: The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to natify must sign the form and provide a mailing address (if different than address in Item A). For other persons providing natification, the signature is optional.	Name R. J. Baechle	
			400 South Main Stre	eet
			Street 400 Bodell Main Select	Transporter
			City Wood River State	IL Z _{ip Code} 62095
		Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required	signature II. I. Bacch	Date 5-15-81 C Other
		Check the boxes which best describe the relationship to the site of the person	Signature 11.1. Back	VA 5_15_01